DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 02/14/2012 FORM APPROVED OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) M A. BUI		PLE CONSTRUCTION G 01,02	(X3) DATE SURVEY COMPLETED	
		A. SOLED			01,02	R	
		155608	B. WIIV	_		02/0	9/2012
NAME OF PROVIDER OR SUPPLIER WITTENBERG LUTHERAN VILLAGE					REET ADDRESS, CITY, STATE, ZIP CODE 1200 E LUTHER DR CROWN POINT, IN 46307		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREF TAG		PROVIDER'S PLAN OF CORREC (EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APPR DEFICIENCY)	ULD BE	(X5) COMPLETION DATE
{K 000}	INITIAL COMMENTS		{K (000]	}		
	Federal Monitoring S was conducted by the of Health in accordant Survey Date: 02/09/Facility Number: 000 Provider Number: 15 AIM Number: 10026 Surveyor: Bridget Br Specialist At this PSR survey, Was found in complian Participation in Medic Subpart 483.70(a), Li 2000 edition of the Nassociation (NFPA) 1 Chapter 19, Existing The original one story basement identified a determined to be to be construction and was unsprinklered Chapel building 202 was detected to the facility. The fabuildings due to differ	2525 25468 27010 Own, Life Safety Code Wittenberg Lutheran Village nce with Requirements for care/Medicaid, 42 CFR fe Safety from Fire and the ational Fire Protection 101, Life Safety Code (LSC), Health Care Occupancies. y building with a partial as building 102 was					
	detection in the corrid corridors with battery resident rooms. The	alarm system with smoke dors and spaces open to the powered smoke detectors in facility has the capacity for s of 146 at the time of this					
LABORATORY	 DIRECTOR'S OR PROVIDER/:	SUPPLIER REPRESENTATIVE'S SIGNATURE			TITLE		(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

Facility ID: 000515

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NAME OF PROVIDER OR SUPPLIER WITTENBERG LUTHERAN VILLAGE WITTENBERG LUTHERAN VILLAGE STREET ADDRESS, CITY, STATE, ZIP CODE 1200 E LUTHER DR CROWN POINT, IN 46307 PREFIX TAG PROVIDERS PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) PREFIX TAG CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY CODE Specialist-Medical Survey on 02/13/12. A Post Survey Revisit (PSR) to the Comparative Federal Monitoring Survey conducted on 11/28/11 was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a). Survey Date: 02/09/11 Facility Number: 000525 Provider Number: 155468 AIM Number: 100267010 Surveyor: Bridget Brown, Life Safety Code Specialist At this PSR survey, Wittenberg Lutheran Village was found in compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 19, Existing Health Care Occupancies. The original one story building with a partial	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MI A. BUIL		LE CONSTRUCTION 6 01,02	(X3) DATE SURVEY COMPLETED R 02/09/2012	
NAME OF PROVIDER OR SUPPLIER WITTENBERG LUTHERAN VILLAGE (X4) ID PREFIX TAG REGULATORY OR ISC IDENTIFYING INFORMATION) (K 000) Continued From page 1 survey. Quality Review by Robert Booher, Life Safety Code Specialist-Medical Survey conducted on 11/28/11 was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a). Survey Date: 02/09/11 Facility Number: 000525 Provider Number: 105267010 Surveyor: Bridget Brown, Life Safety Code Specialist At this PSR survey, Wittenberg Lutheran Village was found in compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 19, Existing Health Care Occupancies. The original one story building with a partial			155608	B. WIN	G			
REGULATORY OR LSC IDENTIFYING INFORMATION PREFIX TAG CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY	NAME OF PROVIDER OR SUPPLIER				12	200 E LUTHER DR		0/2012
Survey. Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 02/13/12. A Post Survey Revisit (PSR) to the Comparative Federal Monitoring Survey conducted on 11/28/11 was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a). Survey Date: 02/09/11 Facility Number: 000525 Provider Number: 155468 AIM Number: 100267010 Surveyor: Bridget Brown, Life Safety Code Specialist At this PSR survey, Wittenberg Lutheran Village was found in compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 19, Existing Health Care Occupancies. The original one story building with a partial	PREFIX	(EACH DEFICIENCY MUST BE PRECEDED BY FULL		PREFI		(EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APPR	TION SHOULD BE COMPLETIC THE APPROPRIATE	
basement identified as building 102 was determined to be to be of Type II (000) construction and was partially sprinklered. The unsprinklered Chapel/Fellowship Hall identified as building 202 was determined to be Type V (000) construction and occupies a 1990 wing addition to the facility. The facility is surveyed as two buildings due to different construction types. The facility has a fire alarm system with smoke detection in the corridors and spaces open to the	{K 000}	Survey. Quality Review by Roc Code Specialist-Media A Post Survey Revision Federal Monitoring States and Code Specialist-Media A Post Survey Revision Federal Monitoring States and Code of Health in accordant Survey Date: 02/09/16 Facility Number: 0000 Provider Number: 15 AIM Number: 10026 Surveyor: Bridget Broc Specialist At this PSR survey, Volume was found in complia Participation in Media Subpart 483.70(a), Lic 2000 edition of the Natassociation (NFPA) 1 Chapter 19, Existing Interpretable The original one story basement identified a determined to be to be construction and was unsprinklered Chapel building 202 was detected to the facility. The facility has a fire The facility has a fire	bert Booher, Life Safety cal Surveyor on 02/13/12. t (PSR) to the Comparative urvey conducted on 11/28/11 e Indiana State Department ce with 42 CFR 483.70(a). It 1525 5468 7010 Iwn, Life Safety Code Wittenberg Lutheran Village nce with Requirements for are/Medicaid, 42 CFR fe Safety from Fire and the ational Fire Protection 01, Life Safety Code (LSC), Health Care Occupancies. It building with a partial s building 102 was e of Type II (000) partially sprinklered. The VFellowship Hall identified as ermined to be Type V (000) upies a 1990 wing addition cility is surveyed as two ent construction types.	{K C	000}			

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A. BUILDING 01, 02 B. WING 02/09/		
02.60	/2012	
NAME OF PROVIDER OR SUPPLIER WITTENBERG LUTHERAN VILLAGE STREET ADDRESS, CITY, STATE, ZIP CODE 1200 E LUTHER DR CROWN POINT, IN 46307		
(X4) ID SUMMARY STATEMENT OF DEFICIENCIES ID PROVIDER'S PLAN OF CORRECTION PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	OULD BE COMPLETION	
(K 000) Continued From page 2 corridors with battery powered smoke detectors in resident rooms. The facility has the capacity for 155 and had a census of 146 at the time of this survey.		